Filing Date **CLAIMS ONLY** * May be used for additional claims or amendments AFTER FIRST AMENDMENT CLAIMS AS FILED AFTER SECOND AMENDMENT Indep Depend Indep Depend Indep Depend Indep Depend Indep Depend Indep Depernd 54 55 10 11 13 17 73 26 27 36 86 92 Total Total Indep Indep Total Total Depend Depend Total Total Claims